ENERGIZED ELECTRICAL WORK PERMIT			
	PART I. TO BE COMPLETED BY THE RE	QUESTOR	
Equipment description, location,	and MSFC identification number:		
Description of work to be perforn	ned:		
Date work is scheduled to begin Reginning Date:			
Beginning Date:	Ending Date: not be de-energized or work deferred to the next so		
5. Organization/contractor schedule	ed to perform work:		
6. Requestor:	7. Organization:	8. Date:	
	OVALS TO PERFORM THE WORK WHILE E		
Responsible Organization (equipment owner) Manager:		Date:	
Facilities Engineering Department representative or contractor performing work:		Date:	
MSFC Industrial Safety Department Manager:		Date:	
	PART III. FACILITY WORK REQUE	ST	
Facility Work Request (FWR):			
Facility Work Request (FWR)	Equipment Operations Checklist, MWI 871 as evidence of Industrial Safety Departmental parts operating at 50 volts or more.		